Case 18-11345 Doc 1 Filed 04/18/18 Entered 04/18/18 16:10:36 Desc Main Document Page 1 of 50

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Kabrinca	
	pictu	r government-issued ure identification (for mple, your driver's	First name	First name
	licer	nse or passport).	Middle name	Middle name
	Brin	g your picture	Davis	
		itification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-2277	

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Case number (if known) Debtor 1 Kabrinca Davis

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	doing business as names	EINs	EINs
5 .	Where you live		If Debtor 2 lives at a different address:
		318 Maple Drive Apt. 14 Morris, IL 60450 Number, Street, City, State & ZIP Code Grundy County	Number, Street, City, State & ZIP Code County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Kabrinca Davis

Par	t 2: Tell the Court About	Your B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankrupt e box.	су
	choosing to file under	■ Cl	hapter 7				
		□ CI	hapter 11				
		□ CI	hapter 12				
		□ CI	hapter 13				
3.	How you will pay the fee	_	about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee yo	k with the clerk's office in your local court for more de burself, you may pay with cash, cashier's check, or m alf, your attorney may pay with a credit card or check	oney
					callments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to I	Pay
			but is not req applies to you	uired to, waive y ur family size an	your fee, and may do so only if your fee, and may do so only if you you are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a judge rour income is less than 150% of the official poverty ling installments). If you choose this option, you must fil cial Form 103B) and file it with your petition.	e that
. 9.	Have you filed for	■ No					
	bankruptcy within the						
	last 8 years?	☐ Ye	s. District		When	Case number	
			District		When	Case number Case number	
			District		When	Case number	
			2.661				
10.	Are any bankruptcy cases pending or being	■ No)				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District	-	When	Case number, if known	
11.	Do you rent your residence?	■ No	Go to I	ine 12.			
	residence :	☐ Ye	s. Has yo	our landlord obta	ained an eviction judgment agains	st you?	
				No. Go to line	12.		
				Yes. Fill out <i>Ini</i> this bankruptcy		Judgment Against You (Form 101A) and file it as par	t of

Deb	otor 1 Kabrinca Davis			Document Page 4 of 50 Case number (if known)	
Pari	t 3: Report About Any Bu	usinesses	You Own	as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code	
	it to this petition.		Check	the appropriate box to describe your business:	
				Health Care Business (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in 11 U.S.C. § 101(53A))	
				Commodity Broker (as defined in 11 U.S.C. § 101(6))	
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	er Chapter 11, the court must know whether you are a small business debtor so that dicate that you are a small business debtor, you must attach your most recent balan by statement, and federal income tax return or if any of these documents do not exist)(B).	ce sheet, statement of
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ing under Chapter 11, but I am NOT a small business debtor according to the defini	tion in the Bankruptcy
		☐ Yes.	I am fi	ing under Chapter 11 and I am a small business debtor according to the definition in	the Bankruptcy Code.
Par	t 4: Report if You Own or	r Have Any	/ Hazardo	us Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to public health or safety?		What is t	ne hazard?	
	Or do you own any property that needs immediate attention?			ate attention is why is it needed?	

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

Debtor 1 Kabrinca Davis

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Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DCD	Rabillica Davis				Oasc na	amber (ii known)	
Part	6: Answer These Quest	ions for Re	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily money for a business or in			ebts that you incurred to ob business or investment.	tain
			\square No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts yo	ou owe that are not cons	sumer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	oter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expension are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99		□ 1,000-5,0 □ 5001-10,0		□ 25,001-50,000 □ 50,001-100,00	
	owe:	☐ 100-19 ☐ 200-9		☐ 10,001-25	5,000	☐ More than100),000
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,0 □ \$50,000,0	01 - \$10 million 001 - \$50 million 001 - \$100 million ,001 - \$500 million	□ \$500,000,001 □ \$1,000,000,00 □ \$10,000,000, □ More than \$50	01 - \$10 billion 001 - \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,0 □ \$50,000,0	01 - \$10 million 001 - \$50 million 001 - \$100 million ,001 - \$500 million	□ \$500,000,001 □ \$1,000,000,0 □ \$10,000,000, □ More than \$5	001 - \$10 billion ,001 - \$50 billion
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I	declare under penalty o	of perjury that the in	nformation provided is true	and correct.
						gible, under Chapter 7, 11,1 d I choose to proceed under	
			ney represents me and I d t, I have obtained and read			is not an attorney to help m)).	e fill out this
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankrupto and 3571	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. /s/ Kabrinca Davis				
		Kabrinc			Signature of De	ebtor 2	
		Executed	on April 18, 2018 MM / DD / YYYY		Executed on	MM / DD / YYYY	
			וווווו / טט / ווווווו			ויווען / טען וויווויווויוויוויוויוויוויוויוויוויוויו	

Debtor 1 Kabrinca Davis

Document Page 7 of 50
Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Patrick A. Meszaros	Date	April 18, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Patrick A. Meszaros 6239538		
Printed name		
Law Office of Patrick Meszaros		
Firm name		
1100 W. Jefferson		
Joliet, IL 60435		
Number, Street, City, State & ZIP Code		
Contact phone 815-722-4001	Email address	patrickmeszaros@yahoo.com
6239538 IL		
Bar number & State		

		Docume	ent Page 8 of 50	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kabrinca Davis			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,160.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,160.00
Pa	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,836.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	20,643.93
	Your total liabilities	\$	29,479.93
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	976.71
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,255.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 9 of 50 Case number (if known) Debtor 1 Kabrinca Davis

	he Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	1 .	
122A-1	Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$	

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

887.87

Debtor 1 Debtor 2 (Spouse, if filing)	Kabrinca Davis First Name	case and this filing: Middle Name			
Debtor 2 (Spouse, if filing) United States Ban	First Name	Middle Name			
(Spouse, if filing) United States Ban		Middle Name			
(Spouse, if filing) United States Ban			Last Name		
	First Name	Middle Name	Last Name		
	kruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS		
Case number	_				
			_		☐ Check if this is ar amended filing
					g
Official For	m 1064/R				
_		ortv			4044
	A/B: Prop	eitems. List an asset only once. If	an accet fits in more than a	and actorious list the accet in	12/15
think it fits best. Be	as complete and accurat space is needed, attach a	e as possible. If two married people a separate sheet to this form. On the	e are filing together, both a	re equally responsible for su	pplying correct
Part 1: Describe F	ach Residence Building	Land, or Other Real Estate You Ov	vn or Have an Interest In		
│. Do you own or ha	ive any legal or equitable	interest in any residence, building	, land, or similar property?		
No. Go to Part	2.				
☐ Yes. Where is	the property?				
Part 2: Describe Y	our Vehicles				
someone else drive	es. If you lease a vehicle	itable interest in any vehicles, in a some items, items, also report it on Schedule G: E			hicles you own that
□ No ■ Yes					
3.1 Make: C	hevy	Who has an interest in th	e property? Check one	Do not deduct secured cla	
	lailbu	■ Debtor 1 only	o property. Oneck one	the amount of any secure Creditors Who Have Clair	
Year: 2	009	Debtor 2 only		Current value of the	Current value of the
Approximate		Debtor 1 and Debtor 2		entire property?	portion you own?
Other informa	ation:	At least one of the debt	ors and another		
		Check if this is comm (see instructions)	unity property	\$1,500.00	\$1,500.00
	ia	Who has an interest in th	e property? Check one	Do not deduct secured cla	
WIOGOI: -	oul	Debtor 1 only		Creditors Who Have Clair	
Year: 20 Approximate	011 mileage: 1190	Debtor 2 only	anh.	Current value of the entire property?	Current value of the portion you own?
Other information		Debtor 1 and Debtor 2 At least one of the debtor 2	•	citillo property:	portion you own:
		_		¢2 000 00	¢2.000.00
		Check if this is comm (see instructions)	unity property	\$3,000.00	\$3,000.00
	eraft motor homes Al	TVs and other recreational vehi	cles other vehicles and	d accessories	
		「Vs and other recreational vehinal watercraft, fishing vessels, sr			
	s, trailers, motors, perso	riai watererart, norming veoders, or	iowinobiles, motorcycle a	ccessories	

☐ Yes

De	ebtor 1	Case 18-1		Doc 1	Filed 04/18/18 Document	Entered 04/18/18 16:10:3 Page 11 of 50 Case number (if kn	
						om Part 2, including any entries for =	\$4,500.00
Da	rt 3: Do	escribe Your Person	nal and Ho	usahald Itam	•		
					est in any of the follow	ring items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Exampl ☐ No —	old goods and fulles: Major applian Describe			nina, kitchenware		
			Furnitu	re			\$2,000.00
7.	Electror Example ■ No	les: Televisions ar			stereo, and digital equip lia players, games	oment; computers, printers, scanners; mu	ısic collections; electronic devices
	_	Describe					
8.	Exampl	bles of value les: Antiques and other collection				oks, pictures, or other art objects; stamp,	coin, or baseball card collections;
	■ No □ Yes.	Describe					
9.		ent for sports ar les: Sports, photo musical instru	graphic, ex		other hobby equipment;	bicycles, pool tables, golf clubs, skis; can	oes and kayaks; carpentry tools;
	☐ Yes.	Describe					
10.	■ No		, shotguns	s, ammunitior	n, and related equipmen	t	
	□ No Î		othes, furs,	, leather coat	s, designer wear, shoes	, accessories	
			Clothin	g			\$500.00
_				_			
	■ No		velry, cost	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, ge	ms, gold, silver

13. **Non-farm animals** *Examples:* Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

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Case number (if known) Document Debtor 1 **Kabrinca Davis** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. nilar

	Cash Examples: Money you ha No Yes		ome, in a safe deposit box, and on hand when you file your peti	tion
	institutions. If		ounts; certificates of deposit; shares in credit unions, brokerage s with the same institution, list each.	houses, and other similar
	□ No		Institution name:	
	Yes			
		17.1. Checking	Checking Account Chase	\$160.00
	Bonds, mutual funds, or Examples: Bond funds, in No ☐ Yes		okerage firms, money market accounts name:	
	joint venture	k and interests in incorpo	orated and unincorporated businesses, including an intere	est in an LLC, partnership, and
	■ No			
	☐ Yes. Give specific inform	mation about them Name of entity:	 % of ownership:	
	Negotiable instruments in	clude personal checks, cas nts are those you cannot tra	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	Retirement or pension at Examples: Interests in IRA	ccounts A, ERISA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sharin្	g plans
	Yes. List each account s	separately. Type of account:	Institution name:	
22.		deposits you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compa	anies, or others
	■ No			
	☐ Yes		Institution name or individual:	
		a periodic payment of mone	ey to you, either for life or for a number of years)	
	■ No			
	Yes Issu	er name and description.		
	Interests in an education 26 U.S.C. §§ 530(b)(1), 52		ualified ABLE program, or under a qualified state tuition p	rogram.

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

■ No ☐ Yes.....

De	ebtor 1	Kabrinca Davis	Document	Page 13 of 50 Case number (if known	n)
25.	Trusts, ■ No	equitable or future interests in property	(other than anythin	g listed in line 1), and rights or powers e	xercisable for your benefit
	_	Give specific information about them			
26.	Examp ■ No	s, copyrights, trademarks, trade secrets, les: Internet domain names, websites, proc Give specific information about them			
		•			
27.		es, franchises, and other general intangi les: Building permits, exclusive licenses, co		n holdings, liquor licenses, professional licer	nses
	_	Give specific information about them			
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you			
	■ No □ Yes.	Give specific information about them, includ	ling whether you alre	ady filed the returns and the tax years	
29.	■ No	• •	ıl support, child suppo	ort, maintenance, divorce settlement, proper	rty settlement
30.	Examp ■ No	imounts someone owes you iles: Unpaid wages, disability insurance pay benefits; unpaid loans you made to so Give specific information	•	efits, sick pay, vacation pay, workers' comp	pensation, Social Security
31.	Examp	ts in insurance policies les: Health, disability, or life insurance; hea	lth savings account (I	HSA); credit, homeowner's, or renter's insur	rance
	■ No	Name the insurance company of each polic	v and list its value		
	— 103.1	Company name:	y and list its value.	Beneficiary:	Surrender or refund value:
32.	If you a someo	erest in property that is due you from so are the beneficiary of a living trust, expect p ne has died. Give specific information		d surance policy, or are currently entitled to re	eceive property because
33.		against third parties, whether or not you les: Accidents, employment disputes, insur			
	☐ Yes.	Describe each claim			
34.	■ No	contingent and unliquidated claims of ev	ery nature, includin	g counterclaims of the debtor and rights	to set off claims
35	Any fin	ancial assets you did not already list			
JJ.	■ No	anotal assets you aid not already list			
	☐ Yes.	Give specific information			

Official Form 106A/B Schedule A/B: Property page 4

Case 18-11345 Doc 1 Filed 04/18/18 Entered 04/18/18 16:10:36 Desc Main Document Page 14 of 50 Case number (if known)

DCL	Rapiffica Davis		Case Hamber (ii known)	
36.	Add the dollar value of all of your entries from Part 4, includ for Part 4. Write that number here	ling any entries for pag	ges you have attached	\$160.00
Part	5: Describe Any Business-Related Property You Own or Have an Int	terest In. List any real esta	ate in Part 1.	
27 Г	Do you own or have any legal or equitable interest in any business-rel	ated property?		
37. -		ateu property :		
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property Yolf you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
	•			
46. I	Do you own or have any legal or equitable interest in any farn	n- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
	Do you have other property of any kind you did not already lise Examples: Season tickets, country club membership ■ No ■ Yes. Give specific information	st?		
54.	Add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$4,500.00		
57.	Part 3: Total personal and household items, line 15	\$2,500.00		
58.	Part 4: Total financial assets, line 36	\$160.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,160.00	Copy personal property total	\$7,160.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$7,160.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this information to identify your case:
Debtor 1 Kabrinca Davis
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
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- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
Copy the value from Schedule A/B				
\$3,000.00		\$2,400.00	735 ILCS 5/12-1001(c)	
		100% of fair market value, up to any applicable statutory limit		
\$3,000.00		\$600.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
		100% of fair market value, up to any applicable statutory limit		
\$160.00		\$160.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
	\$3,000.00 \$2,000.00 \$500.00	\$3,000.00 \$3,000.00 \$\$2,000.00 \$\$500.00 \$	\$3,000.00 \$3,000.00 \$3,000.00 \$3,000.00 \$3,000.00 \$3,000.00 \$400.00	

Desc Main Case 18-11345 Doc 1 Filed 04/18/18 Entered 04/18/18 16:10:36 Document Page 16 of 50 Debtor 1 Kabrinca Davis Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spaces is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Fart List All Secured Claims			Document	Page 1	7 of 50		
Debtor 2 (Spouse 8, filing) First Name Midde Name Last Name Midde Name Last Name Last Name United States Bankruptcy Count for the: NORTHERN DISTRICT OF ILLINOIS Case number (I known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Ba as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space number (if known) 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Pers II list All Secured Claims. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If an orditor has a particular claim, list the orditor sparately for each claim. If more than one creditor has a particular claim, list the orditor sparately. The creditor's Name 2. List all secured Claims. 2. List all secured Claims in alphabetical ordier according to the creditor's name. 2. List all seas possible, its the claims in alphabetical ordier according to the creditor's name. 2. Column A amount of claim box to deduct the value of collateral has a particular claim, list the ordicor sparately. The possible is the claims in alphabetical ordier according to the creditor's name. 2. Column A amount of claim box to accord to a control of the creditor's name. 2. Column B amount of claim box to accord to a control of the creditor's name. 2. Column B amount of claim box to accord to a control of the creditor's name. 2. Column B amount of claim box to accord to a control of the creditor's name. 2. Column B amount of claim box to accord to a control of the creditor's name. 2. Column B amount of claim box to accord to a control of the creditor's name. 2. Column B amount of claim box to accord to a control of the creditor's name. 2. Column B amount of claim box to accord to a con	Fill in this inform	ation to identify you	ır case:				
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United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (pitxoner) Check if this is an amended filling Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in needed, copy the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in needed, copy the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in needed, copy the Additional Pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in new pages, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in needed, copy the Additional Pages, fill it out, number the entries and attach it to this form. On the top of any additional pages, write your name and case in needed filling. I Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Value of collateral box and another claims in alphabetical order according to the creditor's name. Sa,836.00 Sa,836.00 Sa,836.00 Sa,936.00	Debtor 2						
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Southfield, MI 48234 Contingent Unliquidated Disputed Who owes the debt? Check one: Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Date debt was incurred Last 4 digits of account number unknown Add the dollar value of your entries in Column A on this page. Write that number here: \$8,836.00 If this is the last page of your form, add the dollar value totals from all pages. \$8,836.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	25505 W 1	2 Mile Rd Ste	As of the date you file the claim is	* Charle all that			
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 find claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: Add the dollar value of your form, add the dollar value totals from all pages. Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money Security Add the dollar value of your entries in Column A on this page. Write that number here: \$8,836.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,836.00 Variet that number here: \$8,836.00 Variet that number here: \$8,836.00 Variet that number here: Sa,836.00 Variet that number here: Sa,836.00				• Check all that			
Who owes the debt? Check one. Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number unknown Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,836.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	Southfield	, MI 48234	_				
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number unknown Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	Number, Street,	City, State & Zip Code	Unliquidated				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred □ Last 4 digits of account number unknown □ Unknown □ Hold the dollar value of your entries in Column A on this page. Write that number here: □ If this is the last page of your form, add the dollar value totals from all pages. □ Write that number here: □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Purchase Money Security □ Unknown □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Purchase Money Security □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Purchase Money Security □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgm	Who owes the del	ot? Check one.	•				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred □ Last 4 digits of account number unknown □ Madd the dollar value of your entries in Column A on this page. Write that number here: □ If this is the last page of your form, add the dollar value totals from all pages. □ Write that number here: □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Purchase Money Security □ Purchase Money Security □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Unknown □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Judgment lien from a lawsuit □ Judgment lien from a lawsuit □ Other (including a rig	Debtor 1 only			mortgage or se	ecured		
□ At least one of the debtors and another □ Judgment lien from a lawsuit □ Check if this claim relates to a community debt □ Other (including a right to offset) □ Purchase Money Security Date debt was incurred □ Last 4 digits of account number □ unknown Add the dollar value of your entries in Column A on this page. Write that number here: \$8,836.00 □ \$8,836.00 □ \$8,836.00 □ \$8,836.00 □ \$8,836.00 □ \$1 □ \$1 □ \$1 □ \$1 □ \$1 □ \$1 □ \$1 □	Debtor 2 only		car loan)				
Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number unknown Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,836.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	☐ Debtor 1 and Del	btor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
Date debt was incurred Last 4 digits of account number unknown Add the dollar value of your entries in Column A on this page. Write that number here: \$8,836.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,836.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is			☐ Judgment lien from a lawsuit				
Add the dollar value of your entries in Column A on this page. Write that number here: \$8,836.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,836.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is			Other (including a right to offset)	Purchase	Money Security		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,836.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	Date debt was incu	rred	Last 4 digits of account nun	nber <u>unkn</u>	own		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$8,836.00 Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	Add the dellar va	lue of your entries in C	olumn A on this page. Write that num	nhar hara	\$9.92	26.00	
Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is		•					
Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	Write that numbe	r here:			\$8,83	86.00	
Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is	Part 2: List Oth	ers to Re Notified fo	r a Debt That You Already Lister	d			
	•		•		u already listed in Dort 1	Far evenue if a called	tion occupy in
trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.	trying to collect fro than one creditor for	m you for a debt you or or any of the debts that	we to someone else, list the creditor you listed in Part 1, list the addition	r in Part 1, and	then list the collection ag	gency here. Similarly, if	you have more
Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1			Zip Code	On wh	ich line in Part 1 did you e	nter the creditor? 2.1	
Shindler & Joyce 1990 E Algonquin Rd Last 4 digits of account number	1990 E AI	•			•		
Ste 180 Schaumburg, IL 60173		urg, IL 60173					

	Odde 10 110-0 Dod	Document	Page 18 of 50	DCSC Main
Fill in t	this information to identify your case			
Debtor	1 Kabrinca Davis			
200.0.	First Name	Middle Name	Last Name	
Debtor				
(Spouse	if, filing) First Name	Middle Name	Last Name	
United	States Bankruptcy Court for the: NC	ORTHERN DISTRICT OF ILI	INOIS	
Case n	number			
(if known				☐ Check if this is an
				amended filing
Offici	al Form 106E/F			
	edule E/F: Creditors Who	Have Unsecured	Claims	12/15
			Y claims and Part 2 for creditors with NONPRIORIT	
Schedul left. Atta name an	e D: Creditors Who Have Claims Secured ich the Continuation Page to this page. If ad case number (if known).	by Property. If more space is you have no information to re	Oo not include any creditors with partially secured on needed, copy the Part you need, fill it out, number in port in a Part, do not file that Part. On the top of any	the entries in the boxes on the
Part 1:				
_	any creditors have priority unsecured cla	ims against you?		
	No. Go to Part 2.			
	Yes.			
Part 2:				
3. Do	any creditors have nonpriority unsecured	claims against you?		
	No. You have nothing to report in this part. S	ubmit this form to the court with	your other schedules.	
	Yes.			
uns	ecured claim, list the creditor separately for en one creditor holds a particular claim, list the	each claim. For each claim listed	ne creditor who holds each claim. If a creditor has media, identify what type of claim it is. Do not list claims alread nave more than three nonpriority unsecured claims fill of	ady included in Part 1. If more
				Total claim
4.1	Consultants in Pathology, SC P	CCL Last 4 digits of acc	ount number 1113	\$44.39
	Nonpriority Creditor's Name			
	PO Box 30309 Charleston, SC 29417-0309	When was the debt	incurred?	
	Number Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIOR	RITY unsecured claim:	
	☐ Check if this claim is for a communit	y Student loans		
	debt		ng out of a separation agreement or divorce that you di	d not
	Is the claim subject to offset?	report as priority clai		
	No	•	or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	medical	

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Debtor 1 Kabrinca Davis Case number (if know) 4.2 \$3,143.34 Convergent Outsourcing, Inc. Last 4 digits of account number 7673 Nonpriority Creditor's Name PO Box 9004 When was the debt incurred? Renton, WA 98057-9004 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collection for Sprint ☐ Yes 4.3 **Cook County Health & Hospitals** Last 4 digits of account number 4815 \$234.00 Nonpriority Creditor's Name P.O. Box 70121 When was the debt incurred? Chicago, IL 60673-5698 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical Other, Specify Credit Management LP 4.4 Last 4 digits of account number 3389 \$207.59 Nonpriority Creditor's Name **BANKRUPTCY DEPARTMENT** When was the debt incurred? PO Box 118288 Carrollton, TX 75007-1912 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection for US Cellular ☐ Yes

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Debtor 1 Kabrinca Davis Case number (if know) 4.5 \$666.90 **EMP of Cook County** Last 4 digits of account number 2710 Nonpriority Creditor's Name PO Box 636750 When was the debt incurred? Cincinnati, OH 45263 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes 4.6 Epic Group, S.C. Last 4 digits of account number 7030 \$378.00 Nonpriority Creditor's Name P.O. Box 88087 When was the debt incurred? Chicago, IL 60680-1087 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical Other, Specify 4.7 **Express** Last 4 digits of account number 7518 \$135.31 Nonpriority Creditor's Name P.O. Box 659728 When was the debt incurred? San Antonio, TX 78265-9728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit card

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Debtor 1 Kabrinca Davis Case number (if know) 4.8 \$3,025.85 Franciscan Alliance, Inc. Last 4 digits of account number 4887 Nonpriority Creditor's Name 37653 Eagle Way When was the debt incurred? Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify insurance ☐ Yes 4.9 Last 4 digits of account number 8522 \$1,663.00 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? Tinlev Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collection for Pediatric Faculty Foundation ☐ Yes 4.1 **Illinois Department** \$213.00 Last 4 digits of account number Nonpriority Creditor's Name of Transportation When was the debt incurred? 3215 Executive Park Drive Springfield, IL 62766-0001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify High Way tolls ☐ Yes

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Case number (if know) Debtor 1 Kabrinca Davis 4.1 Midstate Collection Solutions, Inc 1545 \$410.77 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3292 When was the debt incurred? Champaign, IL 61826-3292 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collection of Prairie State College ☐ Yes 4.1 **Morris Hospital** unknown \$500.00 Last 4 digits of account number Nonpriority Creditor's Name **Business Office** When was the debt incurred? 150 West High St. Morris, IL 60450-1497 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical 4.1 Morris Hospital 6102 \$2,114.00 3 Last 4 digits of account number Nonpriority Creditor's Name **Business Office** When was the debt incurred? 150 West High St. Morris, IL 60450-1497 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify medical

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Debtor 1 Kabrinca Davis Case number (if know) 4.1 Oaklawn Radiology 4887 \$512.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 37241 Eagle Way When was the debt incurred? Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify medical 4.1 **Pediatrix Medical Group** 7155 \$240.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 88087 When was the debt incurred? Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical ☐ Yes multiple 4.1 \$2,582.00 Silver Cross Hospital Last 4 digits of account number accts Nonpriority Creditor's Name 7008 Solution Center When was the debt incurred? Chicago, IL 60677 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes

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Document Page 24 of 50 Case number (if know) Debtor 1 Kabrinca Davis 4.1 **United Collection Bureau** 5945 \$106.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 140190 When was the debt incurred? **Toledo, OH 43614** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for Foundation Radiology Group ☐ Yes 4.1 Vengroff, Williams & Associates,Inc 6**Z**44 \$4,467.78 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 4155 When was the debt incurred? Sarasota, FL 34230-4155 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collection for State Farm ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MiraMed Revenue Group Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Dept 77304** Part 2: Creditors with Nonpriority Unsecured Claims PO Box 77000 Detroit, MI 48277-0304 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Professional Bureau of Collections** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 628 Part 2: Creditors with Nonpriority Unsecured Claims Elk Grove, CA 95759 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Scheer, Green & Burke Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1312 Part 2: Creditors with Nonpriority Unsecured Claims Toledo, OH 43603 Last 4 digits of account number

The Pediatric Faculty Foundation PO Box 4051

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

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Debtor 1 Kabrinca Davis

Carol Stream, IL 60197-4051

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,643.93
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 20,643.93

		17(1,111)	111 1 7111. 7 17 171 . 11	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Kabrinca Davis			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

		Docume	ent Page 27 d	ot 50	
Fill in thi	s information to identify your	case:			
Debtor 1	Kahringa Davis				
Debiori	Kabrinca Davis First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	lling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nun	nber				
(if known)					Check if this is an
					amended filing
Officia	al Form 106H				
		la la tama			
Sche	dule H: Your Cod	eptors			12/15
andehtar	s are neonle or entities who	iro also liable for any dob	its you may have Bo	es complete and accur	ate as possible. If two married
					needed, copy the Additional Page,
ill it out,	and number the entries in the	boxes on the left. Attach	the Additional Page		p of any Additional Pages, write
our nam	e and case number (if known). Answer every question			
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
	, , ,	,			
■ No					
□Y€	es				
2 Wi	thin the last 8 years, have yo	ı liyed in a community nr	onerty state or territor	ry2 (Community proper	ty states and territories include
	na, California, Idaho, Louisiana				
				,	
■ No	o. Go to line 3.				
□ Ye	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
3. In Co	olumn 1. list all of your codeb	tors. Do not include vour	spouse as a codebto	r if vour spouse is filin	g with you. List the person shown
in lin	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	he creditor on Schedule D (Official
	n 106D), Schedule E/F (Officia Column 2.	I Form 106E/F), or Sched	ule G (Official Form 10	06G). Use Schedule D,	Schedule E/F, or Schedule G to fill
out	Joiumin 2.				
	Column 1: Your codebtor	"D.O. I			editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, lir	10
5.1	Name			□ Schedule E, iii	
				☐ Schedule G, lir	
	Number Street City	State	ZIP Code		
	Oity	Otato	211 0000		
3.2	-			Schedule D, lir	
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street				
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase.						
	otor 1 Kabrinca Da							
	otor 2 puse, if filing)				_			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
(If kr	fficial Form 106l					13 income	ed filing ent showing post as of the followin	
_	chedule I: Your Inc	ome			ľ	MM / DD/ Y	YYY	12/15
sup spo atta Par	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment	are married and not filing wi	ng jointly, and your sp th you, do not include	oouse is e inform	living with	n you, incl it your spo	ude information ouse. If more sp	about your ace is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing s	pouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed			☐ Emplo	•	
	information about additional employers.	, .,	☐ Not employed			☐ Not e	mployed	
	Include part-time, seasonal, or	Occupation	Dietary Aide					
	self-employed work.	Employer's name	Regency Care of	Morris				
	Occupation may include student or homemaker, if it applies.	Employer's address	1095 Twilight Dri Morris, IL 60450	ve				
		How long employed the	here? 5 months	s		_		
Pai	Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to rep	oort for a	ny line, writ	e \$0 in the	space. Include y	our non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all er	nployers for	that perso	on on the lines be	low. If you need
					For De	btor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,	ry, and commissions (becalculate what the month)	efore all payroll y wage would be.	2.	\$1	1,225.25	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

\$ 1,225.25

N/A

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Debt	tor 1	Kabrinca Davis	-	Ca	ase I	number (<i>if kr</i>	nown)					
	_					Debtor 1		n	For Debto	g spou	se	
	Cop	by line 4 here	4.	,	₿	1,225	.25	_ \$	·		N/A	
5.	List	t all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	. 9	\$	248	3.54	\$;		N/A	
	5b.	Mandatory contributions for retirement plans	5b	. 9	\$	(00.0	\$;		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	. 9	\$	(0.00	\$;		N/A	
	5d.	Required repayments of retirement fund loans	5d	l. S	\$	C	0.00	\$;		N/A	
	5e.	Insurance	5e		\$	(00.0	\$;		N/A	
	5f.	Domestic support obligations	5f.		₿		0.00	_	·		V/A	
	5g.	Union dues	5g		· —		0.00	_			V/A	
	5h.	Other deductions. Specify:	_ 5h	.+ 3	Б		0.00	_ + \$	·		N/A	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	·	248	3.54	_ \$;	l	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	· _	976	5.71	_ \$	<i></i>		N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı. S		ſ	0.00	\$	3		N/A	
	8b.	Interest and dividends	8b		·		0.00	_ `			WA	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. (\$		0.00	-	S		W/A	
	8d.	Unemployment compensation	8d	l. S	\$	(0.00	- \$;		V/A	
	8e.	Social Security	8e	. 9	\$	(0.00	\$;		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$		0.00	_			N/A N/A	
	8h.	Other monthly income. Specify:	8h		· —			_ + \$	·		WA	
		· · · · · -						1 Г				
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		(0.00	\$	·		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		976.71	+ \$		N/A	A = 9	;	976.71
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				010111	Ľ			<u> </u>		
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe					•	in <i>Sched</i> i	ule J.		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies								2. \$		976.71
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								mbine nthly	ed income
	_	Voc Evolain:										

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify your case:				
Deb	otor 1 Kabrinca Davis		Checl	k if this is:	
	otor 2				ving postpetition chapter
(Spo	ouse, if filing)			13 expenses as or	the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF IL	LINOIS	Ī	MM / DD / YYYY	
1	se number				
	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.				
Par 1.	Tt 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expen	nses for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		2	Yes
					□ No □ Yes
		-			□ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est exp	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a suplicable date.				
the	clude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule</i> ificial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		735.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as	s home equity loans	5. \$		0.00

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Debtor 1 Kabrinca Davis		Case num	ber (if known)	
6. Utilities:				
6a. Electricity, heat, na	atural gas	6a.	\$	0.00
6b. Water, sewer, gark		6b.		0.00
	one, Internet, satellite, and cable services	6c.	·	100.00
6d. Other. Specify:	one, memor, eateme, and easie convices	6d.	·	0.00
. Food and housekeepin	a sunnlies	7.	·	200.00
. Childcare and children'	•	8.	·	700.00
. Clothing, laundry, and		9.	\$	50.00
0. Personal care products	· ·	9. 10.	·	
•			·	50.00
Medical and dental exp Transportation Include		11.	\$	50.00
 Iransportation. Include Do not include car payment 	gas, maintenance, bus or train fare.	12.	\$	250.00
	ecreation, newspapers, magazines, and books	13.		0.00
4. Charitable contribution		14.	·	0.00
5. Insurance.	s and religious domations	14.	Ψ	0.00
	deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	deducted from your pay of moldaca in inico 4 of 20.	15a.	\$	0.00
15b. Health insurance		15b.	· ·	0.00
15c. Vehicle insurance		15c.	· ·	120.00
15d. Other insurance. S	inecify:	15d.		0.00
	xes deducted from your pay or included in lines 4 or 20		Ψ	0.00
Specify:	xes deducted from your pay or included in lines 4 or 20	16.	\$	0.00
7. Installment or lease pay	vments:		<u> </u>	0.00
17a. Car payments for		17a.	\$	0.00
17b. Car payments for	Vehicle 2	17b.	\$	0.00
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	·	0.00
	ony, maintenance, and support that you did not rep			
	y on line 5, Schedule I, Your Income (Official Form		\$	0.00
	ake to support others who do not live with you.	,	\$	0.00
Specify:		19.		
	enses not included in lines 4 or 5 of this form or o	n Schedule I: Yo	our Income.	
20a. Mortgages on other	er property	20a.	\$	0.00
20b. Real estate taxes		20b.	\$	0.00
20c. Property, homeow	ner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repa	ir, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's asso	ociation or condominium dues	20e.	\$	0.00
1. Other: Specify:		21.	+\$	0.00
			·	2.00
2. Calculate your monthly	•			
22a. Add lines 4 through			\$	2,255.00
	nly expenses for Debtor 2), if any, from Official Form 10)6J-2	\$	
22c. Add line 22a and 22	b. The result is your monthly expenses.		\$	2,255.00
				<u> </u>
3. Calculate your monthly		00-	¢.	070 74
	combined monthly income) from Schedule I.	23a.		976.71
23b. Copy your monthly	expenses from line 22c above.	23b.	-\$ ⁻	2,255.00
220 Cubtroot vour	thly expanded from your monthly income			
	thly expenses from your monthly income. monthly net income.	23c.	\$	-1,278.29
THE TESUIL IS YOU! I	nonuny net income.	250.	<u> </u>	,
4. Do vou expect an incre	ase or decrease in your expenses within the year a	fter vou file this	s form?	
For example, do you expect	to finish paying for your car loan within the year or do you exp			e or decrease because o
modification to the terms of y				
No.				
☐ Yes. Explain	n here:			

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Fill in this infor	mation to identify your o	case:			
Debtor 1	Kabrinca Davis				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
0					
Case number (if known)					☐ Check if this is an
,					amended filing
-					· ·
Official For	m 106Dec				
Declara	tion About a	n Individual	Debtor's Sci	hedules	12/15
Doolara	tion About u		DODIOI O OO		12/13
If two married n	eonle are filing together	, both are equally respor	sible for supplying corr	ect information	
ii two marrica p	copic are ming together	, both are equally respon	ioloic for supplying con-	sot imormation.	
				Making a false statement,	
			ruptcy case can result in	n fines up to \$250,000, or i	mprisonment for up to 20
years, or both.	18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	n Below				
0.5					
Did you na	ay or agree to hay some	one who is NOT an attori	nev to help you fill out ha	ankruntov forms?	
Dia you po	y or agree to pay some		icy to neip you iii out be	initiapitoy forms.	
■ No					
— — Vaa	Name of names			Attach Dankerunter	· Potition Proporario Notice
☐ Yes.	Name of person				Petition Preparer's Notice, Signature (Official Form 119)
				200.0.0.0.0.0.0.0.0.0	ng. natare (G. netal i et in 119)
		that I have read the sumi	nary and schedules filed	d with this declaration and	
that they al	re true and correct.				
X /s/ Kal	brinca Davis		X		
Kabrir	nca Davis		Signature of D	Debtor 2	
Signatu	re of Debtor 1				

Date _____

Date April 18, 2018

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Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married							
Debtor 2 Spourse 4, filing) Frist Name Mode Name Lest Name		in this infor	mation to identify you	r case:			
Debtor 2 Spoose 8, filing Free Name Modde Name Last Name	De	btor 1		Middle Name	Last Nama		
United States Bankruptcy Court for the:NORTHERN DISTRICT OF ILLINOIS Case number	De	btor 2	ristrano	Middle Name	Edot Name		
Case number Check if this is an amended filing Check if this is an amended filin	(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Bankruptcy Affairs for Indivi	Un	ited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy ### Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before Warried		_					
Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married	(IT KI	nown)				-	
Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community propert states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Louis you are filing a joint case and you have income that you received together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income (Defore deductions and Check all that apply. Check all that apply. Check all that apply. Check all that apply.				Affaina fan Indiai	luala Filian fan B		
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married							4/16
Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No							
Married					•	, , ,	
Married	Pa	rt 1: Give I	Details About Your Ma	rital Status and Where You	Lived Before		
■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 9 Debtor 9 Debtor 9 Debtor 9 Debtor 9 Debtor 9 Debtor 1 Debtor 6 Debtor 8 Debtor 9 Debto	1.	What is you	ır current marital statu	ıs?			
■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 9 Debtor 9 Debtor 9 Debtor 9 Debtor 9 Debtor 9 Debtor 1 Debtor 6 Debtor 8 Debtor 9 Debto		□ Massias	1				
2. During the last 3 years, have you lived anywhere other than where you live now? ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: □ Dates Debtor 1 Debtor 2 Prior Address: □ Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community propert states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) ■ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2		_					
No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Ilived there Debtor 2 Prior Address: Dates Debtor 2 Ilived there	•			live decouple are athen them.	hana waw liboa mawa		
Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Dates Debtor 2 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 7 Debtor 7 Debtor 8 Debtor 8 Debtor 9 Deb	۷.	During the	ast 3 years, nave you	lived anywhere other than	where you live now?		
Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 5 Debtor 5 Debtor 6 Debtor 7 Debtor 7 Debtor 8 Debtor 9		■ No					
Sources of income Check all that apply. Sew Mexico S		☐ Yes. Li	st all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	<i>I</i> .	
No		Debtor 1 P	rior Address:		Debtor 2 Prior Ac	Idress:	
No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income Check all that apply. Gross income Check all that apply. Gross income Check all that apply.	3.						
Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income Check all that apply. Gross income Check all that apply. Gross income Check all that apply.	stat	es and territor	ries include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and W	/isconsin.)
Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Doebtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income Check all that apply. Gross income Check all that apply.		■ No					
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Gross income (before deductions		☐ Yes. M	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Gross income (before deductions	Pa	rt 2 Expla	in the Sources of You	r Income			
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pebtor 1 Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Fill in the total amount of income activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income (before deductions and Check all that apply.							
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Gross income (before deductions and Check all that apply. Debtor 2 Gross income Check all that apply. Gross income (before deductions and Check all that apply.	4.	Fill in the tot	al amount of income yo	u received from all jobs and a	all businesses, including part	-time activities.	ndar years?
■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Gross income (before deductions and Check all that apply. Debtor 2 Gross income Check all that apply. Gross income Check all that apply.		□ No					
Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Gross income Check all that apply. Gross income (before deductions and Check all that apply.		_	Il in the details.				
Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Gross income Check all that apply. Gross income (before deductions and Check all that apply.				Dobtor 1		Dobtor 2	
Check all that apply. (before deductions and Check all that apply. (before deductions					Gross income		Gross income
exclusions) and exclusions)							
From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,068.20				•	\$4,068.20	=	
☐ Operating a business ☐ Operating a business				☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Kabrinca Davis

				Debtor 1					Debtor 2		
					of income that apply.	(bef	oss income fore deduction lusions)	ns and	Sources of inc		Gross income (before deductions and exclusions)
	last caler nuary 1 to	dar year: December 3	31, 2017)	■ Wages	, commissions, tips		\$8,5	72.00	☐ Wages, conbonuses, tips	nmissions,	
				☐ Operat	ing a business				☐ Operating a	business	
		dar year bef December 3		■ Wages	, commissions, tips		\$6,5	50.00	☐ Wages, con	nmissions,	
				☐ Operat	ing a business				☐ Operating a	business	
	and other winnings. List each	public benefi If you are filir	t payments; ng a joint cas ne gross inco	ensions; re e and you h		est; div ou rec	vidends; mone ceived togethe	ey collecte er, list it on	ed from lawsuits lly once under D	; royalties; and ebtor 1.	curity, unemployment, I gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe b		eac (bef	ess income fr th source fore deduction lusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3: Lis	t Certain Pay	ments You	Made Befo	re You Filed for I	Bankru	uptcy				
6.	□ No.	Neither De individual p During the S No. Yes * Subject to	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e	ebtor 2 has personal, fare you filed ach credito editor. Do no payments to on 4/01/19 r both have re you filed	amily, or househol for bankruptcy, did r to whom you paid ot include paymen o an attorney for the and every 3 years of primarily consu for bankruptcy, did r to whom you paid	d you p d a tota ts for c nis ban s after t mer de d you p	lebts. Consumose." pay any credit al of \$6,425* of domestic supplikruptcy case, that for cases lebts. pay any credit al of \$600 or r	or a total or more in bort obligation of total or a total more and	of \$6,425* or more partions, such as corrafter the date of \$600 or more the total amount	ore? yments and th hild support ar of adjustment. ?	
		.00		ments for do	omestic support of						nclude payments to an
	Creditor	s Name and	Address		Dates of payme	nt	Total am	ount paid	Amount you still owe	Was this p	ayment for

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Del	btor 1	Kabrinca Davis	Document r	Case number	(if known)			
					-			
7.	<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general parch you are an officer, director, person in iness you operate as a sole proprietor. 11 ny.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partnerships of r more of their voting securitie	which you s; and any	are a general managing a	al partner; corporations agent, including one for	
		No Yes. List all payments to an insider.						
	Insid	ler's Name and Address	Dates of payment		nt you II owe	Reason for	this payment	
8.	inside Includ	le payments on debts guaranteed or cosi		ments or transfer any prope	erty on acc	count of a d	ebt that benefited an	
		Yes. List all payments to an insider	Dates of navment	Total amount Amou	m4 .v.a.v.	December for	this payment	
	msic	ler's Name and Address	Dates of payment		nt you II owe	Include cred	this payment litor's name	
Pai	rt 4:	Identify Legal Actions, Repossession	s. and Foreclosures					
9.	List al modifi	n 1 year before you filed for bankrupto I such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.						
	Case	e title e number	Nature of the case	Court or agency		Status of the case		
	V KAE	EDIT ACCEPTANCE CORP BRINCA DAVIS 16 006036	JUDGMENT	CIRCUIT COURT OF CO COUNTY Sixth Municipal Distric Markum, IL		■ Pending □ On appeal □ Concluded		
10.	Check	n 1 year before you filed for bankrupto all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, foreclosed	d, garnish	ed, attache	d, seized, or levied?	
	Cred	itor Name and Address	Describe the Property		Date		Value of the	
			Evolain what hannened	•			property	
			Explain what happened					
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment beca No 'es. Fill in the details.		luding a bank or financial in	stitution,	set off any a	amounts from your	

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Describe the action the creditor took

No

Creditor Name and Address

☐ Yes

Amount

Date action was

taken

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Pai	t 5: List Certain Gifts and Contributions	6								
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and)	Describe the gifts	Dates you gave the gifts	Value					
	Address:									
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ■ Yes. Fill in the details for each gift or contribution.									
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value					
Pai	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,					
	how the loss occurred	Include	ibe any insurance coverage for the loss the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
Pai	t 7: List Certain Payments or Transfers									
16.	consulted about seeking bankruptcy or pr	repari	id you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you					
	□ No ■ Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Law Office of Patrick A. Meszaros 1100 West Jefferson Joliet, IL 60435		\$500 Atty Fee + \$335 Filing Fee	3/26/18	\$835.00					
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	itors o		or transfer any prope	rty to anyone who					
	■ No □ Yes. Fill in the details.									
	Person Who Was Paid		Description and value of any property	Date payment	Amount of					
	Address		transferred	or transfer was	payment					

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Debtor 1 **Kabrinca Davis**

18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your build like the properties of your build like the properties of your build like the properties of your building the your	usiness or financial affa ide as security (such as t	nirs? he granting of a				
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v property transferr		payme	ibe any property or ents received or debts n exchange	Date transfer wa	as
	Person's relationship to you						
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-production No		y property to a	self-settle	d trust or similar device	of which you are a	а
	☐ Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer w	as
						made	
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and St	orage Unit	s		
20.	Within 1 year before you filed for bankruptcy	,, were any financial ac	counts or instr	uments he	ld in your name, or for y	our benefit, close	d,
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.						
	No						
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balar before closing trans	or
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, ar	ny safe dep	osit box or other depos	itory for securities	۶,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit o	r place other than your	home within 1	year befor	e you filed for bankrupto	cy?	
	■ No						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?	
Par	t 9: Identify Property You Hold or Control t	for Someone Else					
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or ho for someone.						for, or hold in trus	t
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Val	lue
Par	t 10: Give Details About Environmental Info	ormation					
For	the purpose of Part 10. the following definition	ons apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 **Kabrinca Davis**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.							
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.							
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	und	er or in violation of an environme	ntal law?		
		No						
	_	Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice		
25.	Hav	re you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.		
		No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case		
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
		_		v of	the following connections to any	husiness?		
27.	VVIL	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	 □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership 							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to F						
	_	Yes. Check all that apply above and fill		.				
	Bu	siness Name	Describe the nature of the business	-	Employer Identification number			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security r	number or ITIN.		
					Dates business existed			
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement t	o an	yone about your business? Inclu	de all financial		
		No						
		Yes. Fill in the details below.						
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued					
_	_							

Part 12: Sign Below

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Debtor 1 Kabrinca Davis

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kabrinca Davis Signature of Debtor 2 **Kabrinca Davis**

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No

Signature of Debtor 1

Date April 18, 2018

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kabrinca Davis			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing
			viduals Filing Under Ch	napter 7 12/15
	e claims secured by yo	-	out this form in	
			at avairad	
You must file th	ever is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by th e time for cause. You must also send cop	
	eople are filing together nd date the form.	r in a joint case, bo	th are equally responsible for supplying o	orrect information. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this f	orm. On the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credit	tors that you listed in Pa	art 1 of Schedule C	: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
information b	elow.			
Identify the cr	reditor and the property t	hat is collateral	What do you intend to do with the prop secures a debt?	perty that Did you claim the property as exempt on Schedule C?
Creditor's (Credit Acceptance Co	orp	■ Surrender the property.	□No
name:	•	-	Retain the property and redeem it.	
			Retain the property and enter into a	■ Yes
	f 2009 Chevy Mailbu	ม 90000 miles	Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt	· ·			
Part 2: List Y	our Unexpired Persona	I Proporty I oacoc		
			in Schedule G: Executory Contracts and	Unexpired Leases (Official Form 106G), fill
in the information	on below. Do not list rea	al estate leases. Un	expired leases are leases that are still in	effect; the lease period has not yet ended.
You may assum	e an unexpired persona	ıl property lease if	the trustee does not assume it. 11 U.S.C.	§ 365(p)(2).
Describe your I	unexpired personal pro	norty loases		Will the lease be assumed?
Describe your	unexpired personal pro	perty leases		Will the lease be assumed:
Lessor's name:				□ No
Description of le	eased			<u>_</u>
Property:				☐ Yes
Loccorio nomo:				П.,
Lessor's name: Description of le	ased			□ No
Property:				☐ Yes
				55
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Kabrinca Davis	Case number (if known)	
		n of leased		
Pro	perty:			☐ Yes
Lessor's name: Description of leased				□ No
	perty:			☐ Yes
	sor's n	ame: n of leased		□ No
	perty:	7 07 100000		☐ Yes
Lessor's name: Description of leased				□ No
	perty:	101104304		☐ Yes
	sor's n	ame: n of leased		□ No
	perty:	i di leased		☐ Yes
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have in aat is subject to an unexpired lease.	dicated my intention about any property of my estate that sec	cures a debt and any personal
Χ	/s/ K	abrinca Davis	X	
		inca Davis ture of Debtor 1	Signature of Debtor 2	
	Date	April 18, 2018	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-11345 Doc 1 Filed 04/18/18 Entered 04/18/18 16:10:36 Desc Main Document Page 46 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Kabrinca Davis		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTOI	RNEY FOR D	EBTOR(S)	
cc	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the erendered on behalf of the debtor(s) in contemplat	filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rende	red or to
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have received	ved	<u> </u>	500.00	
	Balance Due		\$	0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4 . ■	I have not agreed to share the above-disclosed c	ompensation with any other person	unless they are men	abers and associates of my	y law firm.
	I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				firm. A
5. Iı	n return for the above-disclosed fee, I have agreed	to render legal service for all aspect	s of the bankruptcy	case, including:	
b. c.	Analysis of the debtor's financial situation, and r Preparation and filing of any petition, schedules, Representation of the debtor at the meeting of cr [Other provisions as needed]	statement of affairs and plan which	may be required;		tcy;
6. B	y agreement with the debtor(s), the above-disclose	d fee does not include the following	g service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement on hkruptcy proceeding.	of any agreement or arrangement for	payment to me for	representation of the debte	or(s) in
Ap	oril 18, 2018	/s/ Patrick A. Mes	szaros		
Da	te	Patrick A. Meszai Signature of Attorne Law Office of Pat 1100 W. Jefferson Joliet, IL 60435 815-722-4001 Fa patrickmeszaros	rick Meszaros n x: 815-722-4007		

United States Bankruptcy Court Northern District of Illinois

In re	Kabrinca Davis		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	Creditors: _	23
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	April 18, 2018	/s/ Kabrinca Davis Kabrinca Davis Signature of Debtor		

Consultants in Pathology, SC PCCL PO Box 30309 Charleston, SC 29417-0309

Convergent Outsourcing, Inc. PO Box 9004 Renton, WA 98057-9004

Cook County Health & Hospitals P.O. Box 70121 Chicago, IL 60673-5698

Credit Acceptance Corp 25505 W 12 Mile Rd Ste 30 Southfield, MI 48234

Credit Management LP BANKRUPTCY DEPARTMENT PO Box 118288 Carrollton, TX 75007-1912

EMP of Cook County PO Box 636750 Cincinnati, OH 45263

Epic Group, S.C. P.O. Box 88087 Chicago, IL 60680-1087

Express P.O. Box 659728 San Antonio, TX 78265-9728

Franciscan Alliance, Inc. 37653 Eagle Way Chicago, IL 60678

ICS PO Box 1010 Tinley Park, IL 60477

Illinois Department of Transportation 3215 Executive Park Drive Springfield, IL 62766-0001 Midstate Collection Solutions, Inc PO Box 3292 Champaign, IL 61826-3292

MiraMed Revenue Group Dept 77304 PO Box 77000 Detroit, MI 48277-0304

Morris Hospital Business Office 150 West High St. Morris, IL 60450-1497

Oaklawn Radiology 37241 Eagle Way Chicago, IL 60678

Pediatrix Medical Group PO Box 88087 Chicago, IL 60680

Professional Bureau of Collections P.O. Box 628 Elk Grove, CA 95759

Scheer, Green & Burke PO Box 1312 Toledo, OH 43603

Shindler & Joyce 1990 E Algonquin Rd Ste 180 Schaumburg, IL 60173

Silver Cross Hospital 7008 Solution Center Chicago, IL 60677

The Pediatric Faculty Foundation PO Box 4051 Carol Stream, IL 60197-4051

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United Collection Bureau PO Box 140190 Toledo, OH 43614

Vengroff, Williams & Associates, Inc P.O. Box 4155 Sarasota, FL 34230-4155